



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE #9003

In re Application Of : Group Art Unit 1772  
MICHAEL A. O'NEILL : Examiner Donald J. Loney  
Serial No. 09/981,083 : Confirmation No. 9515  
Filed October 16, 2001 : Atty. Docket No. 133905-00012  
Entitled :  
FIBER-REINFORCED COMPOSITE :  
STRUCTURE :  
:

**TRANSMITTAL OF FORMAL DRAWINGS**

April 24, 2003

Assistant Commissioner for Patents  
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Attn: Patent Office Draftsperson

In response to the Notice of Allowance and Fee(s) Due dated February 26, 2003 in the captioned case, enclosed for filing are SEVENTEEN (17) sheets of corrected formal drawings (FIGS. 1-18) as required by the Draftsman. Please substitute these sheets for those previously filed in the captioned application.

Payment of the issue fee will be submitted under separate cover.

Respectfully submitted,

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PTO/SB/21 (08-00)

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Total Number of Pages in This Submission

Application Number	09/981,083
Filing Date	10/16/2001
First Named Inventor	Michael A. O'Neill
Group Art Unit	1772
Examiner Name	Donald J. Loney
Total Number of Pages in This Submission	1
Attorney Docket Number	133905-00012

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  RETURN POSTCARD
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	William F. Lang, IV Eckert Seamans Cherin & Mellott, LLC
Signature	
Date	April 24, 2003

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